



CIVIL AIR PATROL
UNITED STATES AIR FORCE AUXILIARY

DATE: _____

MEMORANDUM FOR: NHQ CAP/LGM

FROM: HQS _____ CAP/CC

SUBJECT: AIRCRAFT MAJOR MAINTENANCE REIMBURSEMENT REQUEST

N NUMBER: _____ MODEL: _____ TTA: _____ TTE: _____ TTSMOH: _____

TYPE OF MAINTENANCE REQUESTED (CHECK ONE):

☐ ENGINE ☐ AIRFRAME ☐ INTERIOR ☐ AVIONICS ☐ INSTRUMENTS ☐ AD/SB ☐ HSI

DESCRIPTION OF WORK:

COST ESTIMATES: (ESTIMATES FOR PARTS AND LABOR ARE REQUIRED) IF THE TOTAL ESTIMATE OF THE REPAIR EXCEEDS \$2,500, PROVIDE TWO ESTIMATES FROM SEPARATE VENDORS.

VENDOR LABOR: \$ _____ VENDOR PARTS: \$ _____ NHQ PARTS: \$ _____

MAKE PAYMENT TO (LIST WING OR REGION NAME ONLY):

OR VENDOR (NAME, MAILING ADDRESS AND PHONE NUMBER REQUIRED):

PRINT NAME WING COMMANDER/
MAINTENANCE OFFICER

SIGNATURE

PHONE #: () _____

FAX#: () _____

E-MAIL: _____

GOOD FOR 90 DAYS

FOR NHQ CAP USE ONLY

CONTROL NUMBER:

ISSUE DATE: